



FIRE SAFETY SELF DECLARATION
ND DEPARTMENT OF HUMAN SERVICES
CHILDREN AND FAMILY SERVICES
SFN 800 (06-2001)

FAMILY FOSTER HOME
(NDCC 50-11. New section, enacted 8-1-93)

This form must be completed and signed by **each** foster parent before initial licensure and each renewal under this chapter.

Walk through your home and review each point on the form. If your home complies, mark "comply", if it does not comply, mark "fail" and explain how you plan to bring it into compliance, and the timeframe. If the survey point does not apply, mark "n/a". (Note: General recommendations are provided on an attached sheet. You may utilize these general recommendations to help you decide if your home complies.)

It is recommended that you wait until all deficiencies are corrected, initial each item and date, then submit the completed survey form to the licensing social worker.

Name of Fire Department Serving Home: (City/Rural)

Telephone Number of Fire Department:

Name(s):		County:	Telephone Number:	
Address: (Street)		City:	State:	Zip Code:

If Rural, Directions to Home:

Survey Point	Comply	Fail	N/A	Correction/Timeframe
1. I have posted next to my phone a card with my address and a clear set of directions for reaching my home.				
2. Each sleeping room has two means of escape.				
3. Basement has two means of escape, one of which leads directly to the outside (if used by foster care client).				
4. All closet doors equipped with latches, must have latches children can open from the inside.				
5. No exit door is locked against egress by children/adults in care.				
6. Bathroom doors can be unlocked from the outside.				
7. Night lights are provided in all bathrooms.				
8. Tub/shower floors have non-skid materials.				
9. Bathroom is vented or has outside window.				
10. Smoke detection is provided for all sleeping areas and each floor level.				
11. Area near electrical panel box is free from combustibles.				
12. All heating units, to include furnace, water heater and alternate heating devices, are inspected annually.				

Date of most recent inspection:

13. Stairs and exit doors are clear and unobstructed.				
14. Kitchen, furnace room and all occupied floor levels are provided with ABC dry chemical fire extinguishers.				
15. Electrical extension cords are not in permanent use in the home.				
16. Home has at least one operable flashlight in an accessible location.				
17. Home is free from an accumulation of rubbish, particularly near the chimney, furnace, water heater, or other potential place of fire.				

General recommendations are as follows: If you will be providing care to children under age 6, electrical outlets should have protective covers. Walls and ceilings should be free of combustible materials. In al occupied space, interior wall and ceiling finishing should be of fire resistant materials.

General recommendations which relate to Survey Points:

- (1) Anyone calling for help in an emergency can read the address and directions to the emergency responder.
- (2-3) One means of escape may be a window. General recommendation for a window is a window of size and height that can be egressed by an adult or child.
- (5) Doors to outside should be at least 30" wide.
- (10) A smoke detector should be placed in any sleeping room occupied by a foster child or adult.
- (12) All fuel fired heating appliances (or alternate heating devices such as fireplaces, free standing wood stoves, etc.) must be vented; barriers should be provided to protect children and adults from hot surfaces or open flames. Inspections should be completed by a heating/air conditioning professional.
- (14) Fire extinguishers should be 2A10BC rated.

PLAN

(These must be documented)

<input type="checkbox"/> A written escape plan must be formulated.	Date Completed:	
<input type="checkbox"/> Fire drills will be held quarterly and in the first week any child is placed.	Date of Most Recent Fire Drill:	
<input type="checkbox"/> Smoke detectors will be tested monthly.	Date of Most Recent Testing:	
<input type="checkbox"/> Smoke detector batteries will be changed twice yearly.	Date of Most Recent Battery Change:	
<input type="checkbox"/> Extinguishers will be inspected monthly and serviced annually.	Date of Last Servicing:	Date of Last Inspection:

I/We hereby declare that we have conducted the foregoing survey of our home and premises and that we believe the information provided to you accurately reflects the fire/safety status of our home. We understand that this declaration is required for foster home licensure and that provision of false information is grounds for revocation/denial of a license to provide family foster care.

BOTH APPLICANTS MUST SIGN

Applicant's Signature:	Date:
Applicant's Signature:	Date: